

**South Carolina Department of Disabilities
And
Special Needs**

STANDARDS FOR LICENSING DAY FACILITIES

Effective January 1, 2009

South Carolina Department of Disabilities and Special Needs Standards for Licensing Day Facilities

South Carolina Code Annotated §44-20-710 (Supp 2007), authorizes SCDDSN to license day facilities. The Code states:

"No day program in part or in full for the care, training, or treatment of a person with mental retardation, a related disability, head injury, or spinal cord injury may deliver services unless a license first is obtained from the department. For the purpose of this article 'in part' means a program operating for ten hours a week or more."

SCDDSN is authorized to establish minimum standards of operation and license programs as Adult Activity Centers; Work Activity Centers; Sheltered Workshops; and Unclassified Programs which are defined as follows:

- **Adult Activity Center:** A goal oriented program of developmental, prevocational services designed to develop, maintain, increase or maximize an individuals functioning in activities of daily living, physical growth, emotional stability, socialization, communication, and vocational skills. The minimum participant/staff ratio for an Adult Activity Center is 7:1;
- **Sheltered Workshop:** A work program whose purpose is to assist participants to achieve their potential through the use of individual work goals, remunerative employment, supportive services in a controlled environment. The workshop will maintain a certificate with the United States Department of Labor, which designates it as a "regular work program". The minimum participant/staff ratio for a Sheltered Workshop is 10:1.
- **Work Activity Center:** A workshop having an identifiable program designed to provide therapeutic activities for mentally retarded workers whose physical or mental impairment is so severe as to interfere with normal productive capacity. Work or production is not the main purpose of the program; however, the development of work skills is its main purpose. The program must have a certificate from the United States Department of Labor designating it as a Work Activity Program when applicable. The minimum participant/staff ratio for a Work Activity Center is 7:1.
- **Unclassified Program:** A program that provides a beneficial service and observes appropriate standards to safeguard the health and safety of clients, staff and the public. The minimum participant/staff ratio is 10:1.

A license will only be issued to programs which are in compliance with the standards noted in this document. A license may be issued for new programs or those found to be out of compliance upon receipt of an acceptable plan of correction for eliminating deficiencies identified in the official licensing survey. The plan must show that the deficiency will be corrected within a thirty (30) day period. An extension may be granted for another 30 days when requested in writing and good cause shown. A license will be effective for up to a twelve (12) month period, beginning with the date of issuance. DDSN will make a determination of which license to issue based on the services to be rendered through the facility. DDSN's Department Directive 104-01-DD explains the process for becoming licensed.

Definitions

Program: Adult Activity Center, Sheltered Workshop, Work Activity Center, or Unclassified Program.

Service: Support Center, Day Activity, Career Preparation, Employment Services, or Community Services.

Participant: The person with a disability who receives services through the program.

	Standard	Guidance
1	Each program must be operated in accordance with applicable state and federal laws.	Americans with Disabilities Act, HIPAA, US Department of Labor, OSHA, SCDHEC Kitchen Standards, etc.
2	Each program must be operated in accordance with applicable SCDDSN Departmental Directives, procedures, and guidance.	See Attachment 1 to these Standards.
3	Each program will designate a Program Director who meets the following minimal qualifications: <ul style="list-style-type: none">• Is at least twenty-one years old.• Have a four-year, baccalaureate degree from an accredited college or university in the human services or related field and two year's experience in administration or supervision in the human services field or have a master's degree from an accredited college or university in the human services or related field and one year's experience in administration or supervision in the human services• Have references from past employment.	A program director may serve more than one program.
4	Each program will employ direct care staff who meet the following qualifications: <ul style="list-style-type: none">• Is at least eighteen years old.• Have a valid high school diploma or its certified equivalent.• Have references from past employment if the person has a work history.	
5	Staff must meet requirements for criminal background checks.	Checks should be done in accordance with South Carolina

		<p>Code Annotated §44-7-2910 (Supp 2007), No support provider may be employed who has been convicted, pled guilty or nolo contendere to:</p> <ol style="list-style-type: none"> 1. Abuse, neglect or mistreatment of a consumer in any health care setting; 2. An "Offense Against the Person" as provided for in Chapter 3, Title 16; 3. An "Offense Against Morality or Decency" as provided for in Chapter 15, Title 16; 4. Contributing to the delinquency of a minor as provided for in Section 16-17-490 5. The common law offense of assault and battery of a high and aggravated nature; 6. Criminal domestic violence, as defined in Section 16-25-20 7. A felony drug-related offense under the laws of this state; and 8. A person who has been convicted of a criminal offense similar in nature to a crime previously enumerated when the crime was committed in another jurisdiction or under federal law; has a substantiated history of child abuse and/or neglect and/or convictions of those crimes listed in SC Code 20-7-1642 and/or is listed on the SC Sex Offender Registry
6	Staff must pass an initial physical exam prior to working in the program.	Pass = No documentation in the physical exam report of conditions present that would jeopardize health and safety of people receiving services or staff's ability to perform required duties.
7	Staff must pass initial tuberculosis screening prior to working in the program and annually thereafter.	Pass = no evidence of communicable disease Meet requirements of 603-06-DD
8	Staff must be trained and be deemed competent in accordance with Department Directive 567-01-DD.	Policy 567-01-DD Pre-service Training and Orientation

9	There will be a staff development / in-service education program operable in each provider agency which requires all staff to participate in in-service education programs and staff development opportunities.	From 567-01-DD: Staff must periodically be required to demonstrate continuing competency on the most critical information and skills taught in the curriculum. Providers have wide latitude in designing the format of such rechecks. Encouraging staff commitment to continuing personal and professional development will expand the capacity to provide quality service and supports. Staff should routinely be exposed to information regarding training resources and opportunities. Supervisors should be working with staff to identify annual personal and professional goals.
10	There will be at least the following minimum participant/staff ratio for each program: <ul style="list-style-type: none"> • Adult Activity Center - 7:1; • Work Activity Center - 7:1; • Sheltered Workshop - 10:1; • Unclassified Program – 10:1. 	Note: this ratio is applicable to the entire program and staff who are not responsible for direct participant support may be included in this ratio.
11	A designated responsible staff member must be present and in charge at all times a participant is present. The staff member left in charge must know how to contact the director at all times.	
12	At no time shall any participant be without supervision unless a specified activity which allows for an adult participant's independent functioning is planned and documented.	Please refer to SCDDSN policy regarding the supervision of people receiving services (510-01-DD).
13	A minimum participant/staff ratio of 10:1 must be maintained in each classroom, workshop, program area, etc. at all times.	When determining staffing patterns within a program and within a classroom, workshop, program area, etc., the supervision needs of each participant must be considered including their need for "independent functioning" as defined in Standard #12.
14	Each program shall have provisions for alternate coverage for staff members who are ill. Such policies shall require staff members with acute communicable disease,	

	including respiratory infection, gastro-intestinal infection, and skin rash, to absent themselves during the acute phase of illness.	
15	Services provided as part of the morning service unit shall include the provision of any interventions needed by the person for lunchtime dining.	"Morning services unit" means the service unit that begins before 12:00 noon. "Interventions" may include training, supervision, or assistance. The interventions to be provided must be based on assessed needs and be provided in accordance with 510-01-DD.
16	When licensed as an Adult Activity Center, participants will be at least eighteen (18) years of age.	
17	When licensed as an Unclassified Program, participants will be at least twelve (12) years of age.	
18	When licensed as an Unclassified Program, participants under age 18 are served in a program area apart/separated from adult participants.	
19	Each facility shall provide a minimum of fifty (50) square feet of program space per participant.	Per participant present in the facility.
20	Programs must be: a) Free from obvious hazards b) Clean c) Free of litter/rubbish d) Free of offensive odors e) Equipment in good working order f) Accessible to participants and staff	
21	Hot water temperature in the program must never be more than 110 degrees Fahrenheit.	
22	The facility will meet the regulations of the appropriate standards for fire safety as set forth by the South Carolina Fire Marshal codes. Report of an approved fire safety inspection completed by a local Fire Marshal or the State Fire Marshal's shall be maintained in the facility's records.	Fire Safety Inspections, when required, must be made by a Fire Marshal employed by the State Fire Marshal's office. Fees for this service are pre-paid by SCDDSN but inspections must be requested. Requests should only be made via the Internet following these steps: Step 1: Go to www.llr.state.sc.us/fmarshal/ Step 2. Select "Online Inspection Report" Step 3. Enter password "america"

		<p>in lower case letters; Step 4. Selection "Request For Inspection - Other" (Residential) OR "Work Camps" (Day) Step 5. Fill in all sections of the request Step 6. Submit the request Requests must be made at least ninety (90) days in advance. For additional guidance, please contact the Senior Deputy Fire Marshal at (803) 896-9880.</p>
23	The agency shall formulate and post in each room and work area, in a place clearly visible, a diagrammatic plan for evacuation of the building in case of disaster.	
24	All employees shall be instructed and kept informed regarding their duties under the plan.	
25	The center shall hold fire/disaster* drills at least once each quarter. Each drill conducted shall be recorded as to time, date of drill, number of those participating, and the total time required for evacuation. The record shall be signed by the person conducting the drill.	*Fire drills will be held quarterly. Additionally, disaster drills will be held annually.
26	Passageways shall be free of obstructions at all times.	
27	All staff shall be instructed in the proper use of fire extinguishers as documented in reports.	
28	The use of electrical extension cords is prohibited.	
29	Programs serving people who are deaf will develop a fire alarm system to assure the clients are alerted to the danger of fire.	
30	A safety check on electrical systems shall be made by a licensed/certified electrician/contractor and a written report kept on file at the facility at all times. A new inspection shall be made after any expansion, renovation, or the addition of any major electrical appliances or equipment.	
31	All staff shall be knowledgeable of utility cut-offs throughout the facility.	
32	The heating system shall be approved annually by a licensed/certified H.V.A.C. contractor and the report maintained on file at the facility. Floor furnaces shall have	

	adequate protective coverings or guards to insure that individuals coming into contact with them shall not be burned. If space heaters are used, they shall be vented properly and screens or other protective devices shall be provided to prevent individuals from coming into contact with the heaters.	
33	All cleaning equipment supplies, insecticides, etc. shall be in a locked cabinet or located in an area not accessible to unauthorized persons.	
34	Furniture, equipment, and training materials shall be appropriate to the ages of the individuals in the program; shall be sturdily constructed without sharp edges; shall not be covered with toxic paint; and shall present minimal hazards to individuals.	
35	Stationary outdoor equipment shall be firmly anchored.	
36	When providing Support Center Services, the area in which services are provided must have comfortable accommodations and materials for activities that are appropriate for the people who receive the service.	
37	The use of tools and equipment shall be supervised by staff.	Supervision will be provided in accordance with the person's assessed need. As appropriate, independent use of equipment will be allowed.
38	In the presence of unusual hazards arising from certain work operations, appropriate safety precautions shall be taken to insure the protection of those present.	
39	Equipment and Materials for Learning, Recreational Experiences--Indoor and outdoor equipment and materials shall be provided in sufficient quantity and variety to meet the developmental need of the participants. The equipment will be age appropriate for the clients who use it.	
40	If the facility operates a transportation system, vehicles used for the transportation of participants shall ensure safety for the passengers.	
41	Vehicles shall be inspected daily, using a checklist. The driver shall sign a report which indicates that he has checked the	

	lights, brakes, horn, wipers and tires.	
42	Maintenance of vehicles shall be recorded, updated, and signed every month.	
43	Each passenger shall have adequate seating space and shall use a seat belt or restraint system approved by the Highway Traffic Safety Administration Standards which is appropriate for his age while being transported.	
44	Each vehicle will have: <ul style="list-style-type: none"> • first aid kit which is replenished after each use and checked monthly for completeness; • fire extinguisher which is in good working order and securely fastened in a manner which is easily accessible to the driver. 	
45	Vehicle operators and all staff who transport clients will be licensed drivers who are capable of handling road emergencies and hazards and will have a current defensive driving course certificate within one month of employment which is on file in the agency. If there was no course offered within first month this must be verified and the staff must take and pass the first course offered.	
46	Every participant will be examined by a licensed physician within twelve (12) months prior to admission or within 30 days after admission. The results of the exam will be kept at the main program site.	Please note: This standard requires an examination by a physician; it does not require a complete physical examination. "Main program site" is defined as the licensed facility. Exam results are not expected to be maintained on location or at the specific training site.
47	Any evidence of illness or injury shall be documented in the participant's record and action shall be taken to obtain necessary medical treatment of the individual and to safeguard others from contagion.	
48	Medication to be administered shall be stored in a locked cabinet not accessible to unauthorized persons.	

49	Prescribed medication shall be kept in the original containers bearing the pharmacy label which shows drug name, the prescription number, date filled, physician's name, directions for use, and the patient's name.	
50	Written authorization to administer any medication must be given.	If the service recipient is over age 18 and has not been adjudicated incompetent, he/she is considered his/her own guardian and therefore may authorize the administration of his/her medications. If a non-adjudicated adult is unable to authorize, authorization may be given by a parent/representative or surrogate. For those under age 18 or those adults who have been adjudicated incompetent, authorization must be given by parents or guardian.
51	Medications must be safely and accurately given.	<ul style="list-style-type: none"> • Medication has not expired. • There are no contraindications i.e. no allergy for the drug • Administered at: proper time prescribed dosage correct route. <p>603-13-DD: Medication Technician Certification</p>
52	Employees supervising the taking of medication will document that medication was taken by client as authorized by parents or guardian.	<p>For participants not independent in taking their own medication/treatments, a medication/treatment log must be maintained to denote:</p> <ul style="list-style-type: none"> a) The name of medication or type of treatment given b) The current physician's order (and purpose) for the medication and/or Treatment or authorization from the responsible party. c) The name of person giving the medication d) Time given

		<p>e) Dosage given</p> <p>The medication log must be reviewed at a minimum, monthly. If the reviews indicate error, actions must be taken to alleviate future errors. Entries must be made at the time the medication/treatment was given. Medication includes over-the-counter medications.</p>
53	Outdated medications and discontinued medications are disposed of per Provider policy.	
54	A first aid kit shall be maintained at each program site.	<p>First Aid Kit is a collection of supplies which includes: mild hand soap or hand sanitizer liquid; cotton tipped applicators; gauze bandages, one and two inch widths; sterile gauze, three inch by three inch; band-aids; adhesive tape; scissors; disinfectant; and thermometer.</p>
55	Psychological evaluations will be required. Adults shall be tested using a restrictive test of intelligence administered by a licensed or certified psychologist on program entry, re-entry or at age twenty-two (22) whichever occurs first, unless there is a valid psychological evaluation completed within three years of admission on record.	<p>For adults, at the time of program entry, a psychological evaluation that was completed at age 22 or is less than 3 years old must be available for new program participants. In lieu of a psychological evaluation, a current (i.e., within one year of program entry) ICF/MR Level of Care (LOC) Determination that indicates the LOC criteria were met may be used. For example, if a 35 year old participant were entering the program on March 25, 2008, one of the following could be accepted:</p> <ul style="list-style-type: none"> • A psych. eval. completed when he/she was 22 (1995) <i>[on program entry, re-entry or at age twenty-two (22) whichever occurs <u>first</u>]</i> • One completed within the last 3 years (2005-2008) <i>[unless there is a valid psychological evaluation completed within three years]</i> • Or a current LOC Determination that is based on

		a psychological evaluation completed from 1995 until 2005.
56	<p>Each program will have a current activity schedule posted.</p> <p>The schedule will reflect the hours the facility is open and the hours the program offers supervised services.</p> <p>The schedule must reflect the scheduled activities of the day.</p>	<p>Schedules of activities should reflect the general schedule for the program. It is not necessary to specify the discrete activities that will occur with each service or program area. It is acceptable to identify the program start time, break times, lunch times, etc.</p>
57	<p>Each program will have written policies on:</p> <p>(a) Use of volunteers and substitutes;</p> <p>(b) Program evaluation;</p> <p>(c) Administration of medication;</p> <p>(d) Admission and discharge of participants;</p> <p>(e) Personnel practices</p> <p>(f) Procedures to be followed when a participant is discovered to be missing.</p> <p>(g) Termination of participants from the program which include:</p> <ul style="list-style-type: none"> • A list of reasons for dismissal; • Methods of averting the termination; • When consultation and concurrence with the Department prior to termination will be sought. <p>(h) Keeping and managing a waiting list for those who are seeking entry into each service provided in the program that includes the frequency with which the list will be reviewed.</p>	
58	<p>A record shall be maintained for each participant which contains, at a minimum, the items listed below. All documents and entries shall be legible, dated, and signed by the person making the entry. If symbols are used, explanatory legends must be</p>	<p>Record of illnesses and accidents will be maintained for those accidents that occur during service provision and for illnesses made known to the provider.</p>

	<p>provided.</p> <ul style="list-style-type: none"> • Report of a medical examination which was performed not more than twelve (12) months prior to admission; • Report of psychological evaluation(s) as required by these standards; • Current Plan that supports the provision of the service provided ; • Monthly summary notations of progress; • Record of unusual behavior incidents which are recorded at the time of occurrence; • Record of illness and accidents; • Authorization for emergency medical service and medication administration; • Record of critical incidents. 	
59	Reporting requirements are performed correctly.	<p>DDSN Finance Manual, Section 10.1</p> <ul style="list-style-type: none"> • Policy 100-09-DD Reporting of Critical Incidents • Policy 505-02-DD Death or Impending Death of Persons Receiving Services • Policy 250-02-DD Community Financial Reporting Requirements • Policy 534-02-DD Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contract Provider Agency

**South Carolina Department of Disabilities and Special Needs
Standards for Licensing Day Facilities
Attachment 1**

Please note: This list represents the applicable Departmental Directives as of July 1, 2008. Additions or deletions of Departmental Directives after this date have not been included. Please refer to SCDDSN's Web site (www.state.sc.us/ddsn).

- 600-05-DD Behavior Support Plans
- 604-04-DD Certification in First Aid and Cardiopulmonary Resuscitation
- 700-02-DD Compliance with Title VI of the Civil Rights Act of 1964, American's with Disabilities Act of 1990, Age Discrimination Act of 1975 and Section 504 of the Rehabilitation Act of 1973 and Establishment of a Complaint Process
- 535-08-DD Concerns of People Who Receive Services: Reporting and Resolution
- 167-06-DD Confidentiality of Personal Information
- 100-09-DD Reporting of Critical Incidents
- 505-02-DD Death or Impending Death of Persons Receiving Services From DDSN
- 100-17-DD Family Involvement
- 603-06-DD Guidelines for Screening for Tuberculosis
- 603-13-DD Medication Technician Certification
- 535-07-DD Obtaining Consent for Minors and Adults
- 567-01-DD Pre-service Training Requirements and Orientation
- 534-02-DD Procedures for Preventing and Reporting Abuse, Neglect, or Exploitation of People Receiving Services from DDSN or a Contract Provider Agency
- 104-01-DD SCDDSN Certification & Licensure of Residential & Day Facilities
- 536-01-DD Social-Sexual Development
- 510-01-DD Supervision of People Receiving Services
- 603-01-DD Tardive Dyskinesia Monitoring
- 100-26-DD Risk Management Program
- 535-11-DD Appeal and Reconsideration Policy and Procedures
- 503-01-DD Consumer Involvement with Criminal Justice System

100-12-DD	AIDS Policy
535-12-DD	Advance Directives
100-04-DD	Use of Adaptive Behavior Scales
100-25-DD	Disaster Preparedness Plan for DDSN and Other Agencies Providing Services to Persons with Disabilities and Special Needs
100-28-DD	Quality Assurance and Management
100-29-DD	Medication Error/ Event Reporting
101-02-DD	Preventing and Responding to Suicidal Behavior
167-01-DD	Appeal Procedure, For Licensed Programs Serving Persons with Mental Retardation
250-08-DD	Procurement Requirements for Local DSN Boards
368-01-DD	Individual Service Delivery Records Management
535-10-DD	Implementation of National Voter Registration Act
567-02-DD	Policy on Preventing and Responding to Aggression (PRA) and the Approval of Alternative Techniques or Curriculum